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B 6 Summary (Official Form 6 - Summary) (12/13)

United States Bankruptcy Court Southern District of Ohio

In re Robert E Deis,			Case No	2:14-bk-54400
	Joyce E Deis			
-		Debtors	Chapter	13

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	187,200.00		
B - Personal Property	Yes	3	34,284.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		175,728.91	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		22,011.43	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	4		169,461.67	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			6,440.69
J - Current Expenditures of Individual Debtor(s)	Yes	2			2,940.69
Total Number of Sheets of ALL Schedu	ıles	18			
	T	otal Assets	221,484.00		
			Total Liabilities	367,202.01	

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B 6 Summary (Official Form 6 - Summary) (12/13)

United States Bankruptcy Court Southern District of Ohio

In re	Robert E Deis,		Case No	2:14-bk-54400
	Joyce E Deis			
_		Debtors	Chapter	13

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	22,011.43
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	22,011.43

State the following:

Average Income (from Schedule I, Line 12)	6,440.69
Average Expenses (from Schedule J, Line 22)	2,940.69
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	4,794.99

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	22,011.43	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		169,461.67
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		169,461.67

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B6A (Official Form 6A) (12/07)

In re	Robert E Deis,	
	Joyce E Deis	

Case No. **2:14-bk-54400**

Debtors

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

718 Highland Drive Columbus, Ohio 43214		J	187,200.00	175,728.91
Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim

Sub-Total > 187,200.00 (Total of this page)

187,200.00 Total >

0 continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

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B6B (Official Form 6B) (12/07)

In re	Robert E Deis,
	Joyce E Deis

Case No.	2:14-bk-54400
Cube 110.	

Debtors

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O N Description and Loca E	Joint, or	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	х		
2.	Checking, savings or other financial	PNC Checking Account (Brokers	age) H	300.00
	accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and	PNC Checking	W	150.00
	homestead associations, or credit unions, brokerage houses, or	PNC Money Market Account	W	2,800.00
	cooperatives.	PNC Checking Account (Mgmt)	н	8,700.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	x		
4.	Household goods and furnishings, including audio, video, and computer equipment.	Household Goods	J	3,500.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	x		
6.	Wearing apparel.	Clothing	J	300.00
7.	Furs and jewelry.	Diamond ring, diamond necklac	e, wedding ring J	3,000.00
8.	Firearms and sports, photographic, and other hobby equipment.	Firearms	J	2,000.00
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	x		
10.	Annuities. Itemize and name each issuer.	X		

Sub-Total > 20,750.00 (Total of this page)

² continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

Robert E Deis, In re Joyce E Deis

Case No. **2:14-bk-54400**

Debtors

SCHEDULE B - PERSONAL PROPERTY

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	х			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing	IRA		W	300.00
	plans. Give particulars.	401k		W	7,184.00
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
			(Te	Sub-Tota of this page)	al > 7,484.00

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

Robert E Deis, In re Joyce E Deis

Case No. **2:14-bk-54400**

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N O Description and Location E	of Property Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
22. Patents, copyrights, and other intellectual property. Give particulars.	х		
23. Licenses, franchises, and other general intangibles. Give particulars.	х		
24. Customer lists or other compilation containing personally identifiable information (as defined in 11 U.S.C § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.			
25. Automobiles, trucks, trailers, and other vehicles and accessories.	2005 Sundowner Trailer	J	1,500.00
other venicies and accessories.	1999 Lincoln Town Car	Н	1,750.00
	1991 Toyota Supra Salvage title	W	2,000.00
	1977 Coachman Motor Home	н	500.00
26. Boats, motors, and accessories.	X		
27. Aircraft and accessories.	X		
28. Office equipment, furnishings, and supplies.	X		
Machinery, fixtures, equipment, and supplies used in business.	1 X		
30. Inventory.	x		
31. Animals.	Horse	J	300.00
 Crops - growing or harvested. Give particulars. 	X		
33. Farming equipment and implements.	X		
34. Farm supplies, chemicals, and feed	Х		
35. Other personal property of any kind not already listed. Itemize.	X		
		Sub-Tota	al > 6,050.00
n . 2 . 2	1 . 1	(Total of this page) Tota	al > 34,284.00
theet 2 of 2 continuation sheet the Schedule of Personal Property	is attached	(Report a	also on Summary of Schedules

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B6C (Official Form 6C) (4/13)

In re Robert E Deis, Joyce E Deis

Case No.	2:14-bk-54400

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under: (Check one box)

☐ 11 U.S.C. §522(b)(2) ☐ 11 U.S.C. §522(b)(3) ☐ Check if debtor claims a homestead exemption that exceeds \$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Real Property 718 Highland Drive Columbus, Ohio 43214	Ohio Rev. Code Ann. § 2329.66(A)(1)	43,250.00	187,200.00
Checking, Savings, or Other Financial Accounts, C	ertificates of Deposit		
PNC Checking Account (Brokerage)	Ohio Rev. Code Ann. § 2329.66(A)(3)	300.00	300.00
PNC Checking	Ohio Rev. Code Ann. § 2329.66(A)(3)	150.00	150.00
PNC Money Market Account	Ohio Rev. Code Ann. § 2329.66(A)(18) Ohio Rev. Code Ann. § 2329.66(A)(3)	1,150.00 300.00	2,800.00
PNC Checking Account (Mgmt)	Ohio Rev. Code Ann. § 2329.66(A)(3)	150.00	8,700.00
Household Goods and Furnishings Household Goods	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	3,500.00	3,500.00
Wearing Apparel Clothing	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	300.00	300.00
<u>Furs and Jewelry</u> Diamond ring, diamond necklace, wedding ring	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)	2,900.00	3,000.00
<u>Firearms and Sports, Photographic and Other Hob</u> Firearms	by Equipment Ohio Rev. Code Ann. § 2329.66(A)(18)	150.00	2,000.00
Interests in IRA, ERISA, Keogh, or Other Pension of IRA	or Profit Sharing Plans Ohio Rev. Code Ann. § 2329.66(A)(10)(c)	300.00	300.00
401k	Ohio Rev. Code Ann. § 2329.66(A)(10)(b)	7,184.00	7,184.00
Automobiles, Trucks, Trailers, and Other Vehicles 2005 Sundowner Trailer	Ohio Rev. Code Ann. § 2329.66(A)(18)	1,150.00	1,500.00
1999 Lincoln Town Car	Ohio Rev. Code Ann. § 2329.66(A)(2)	3,675.00	1,750.00
1991 Toyota Supra Salvage title	Ohio Rev. Code Ann. § 2329.66(A)(2)	3,675.00	2,000.00

Total: 68,134.00 220,684.00

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B6D (Official Form 6D) (12/07)

In re	Robert E Deis,	
	Joyce E Deis	

Case No. **2:14-bk-54400**

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

	1-	_		-		-	-	
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	COZH _ ZG Z	DZ1-QD-DAFE	Ϋ́	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.	-		Second Mortgage	T	E D			
Household Realty Corp 2929 Walden Ave. Depew, NY 14043		J	718 Highland Drive Columbus, Ohio 43214 Monthly Payment: \$1123.00; Arrears: \$61,089.54					
			Value \$ 187,200.00				135,772.63	0.00
Account No. 10 CV 013755	-		First Mortgage					
Huntington Mortgage Co PO Box 1558 Columbus, OH 43216		J	718 Highland Drive Columbus, Ohio 43214 Monthly Payment: \$728.00; Arrears: \$27,896.43; Insurance: State Farm					
			Value \$ 187,200.00				39,956.28	0.00
Account No.			Value \$					
Account No.								
			Value \$					
continuation sheets attached	_		(Total of t	Subt his p			175,728.91	0.00
			(Report on Summary of So		ota lule		175,728.91	0.00

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B6E (Official Form 6E) (4/13)

In re	Robert E Deis,	Case No. <u>2:14-bk-54400</u>
	Joyce E Deis	
-		Debtors

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priorit listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data. Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
■ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federa Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6E (Official Form 6E) (4/13) - Cont.

In re	Robert E Deis,	Case No	2:14-bk-54400
	Joyce E Deis		

Debtors

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY UNLIQUIDATED CODEBTOR Husband, Wife, Joint, or Community AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ONTINGENT S P U T E D AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C J AND ACCOUNT NUMBER (See instructions.) 2005, 2012 Account No. **Income Tax** Internal Revenue Service 0.00 PO Box 7346 Philadelphia, PA 19101-7346 J 22,011.43 22,011.43 Account No. Account No. Account No. Account No. Subtotal 0.00 Sheet <u>1</u> of <u>1</u> continuation sheets attached to (Total of this page) Schedule of Creditors Holding Unsecured Priority Claims 22,011.43 22,011.43 Total 0.00 (Report on Summary of Schedules) 22,011.43 22,011.43 Case 2:14-bk-54400 Doc 16 Filed 07/01/14 Entered 07/01/14 13:57:12 Desc Main Document Page 11 of 40

B6F (Official Form 6F) (12/07)

In re	Robert E Deis,		Case	e No	2:14-bk-54400	
	Joyce E Deis					
_		Debtors	_,			

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

							131,229.60
Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346		J					
Account No.			Taxes				
c/o Key Bridge 2348 Baton Rouge Lima, OH 45805 Account No. Columbia Gas Oh c/o Allianceone 1684 Woodlands Dr Ste 15 Maumee, OH 43537		н	collection				35.00 153.00
Chrisanne Gordon Md		Н					
ATT c/o Debt Credit Services 2493 Romig Rd Akron, OH 44320 Account No.		н	collection				40.00
Account No.			collection	Ť	T E D		
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	L W J C	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETORE SO STATE	CONTINGEN	UNLIQUIDAT	DISPUTED	AMOUNT OF CLAIM

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B6F (Official Form 6F) (12/07) - Cont.

In re	Robert E Deis,	Case No. 2:14-bk-54400	
	Joyce E Deis		
-		,	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

	Tc	П	sband, Wife, Joint, or Community	16	U	D	I
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	L Q U	I S P U T E	AMOUNT OF CLAIM
Account No.			Collection	Т	E D		
Marathon Petroleum c/o Asset Acceptance LLC PO BOX 2036 Warren, MI 48090		J					912.19
Account No.			Medical Bill		t	t	
Mount Carmel Health Corporate Service Center 6150 E. Broad St. Columbus, OH 43213		J					4.045.00
Account No.	+		Collection				1,015.00
Mt. Carmel New Albany Surgical Hospital c/o Meade & Assoc. 737 Enterprise Dr. Westerville, OH 43081		J					975.00
Account No.			Collection				
Natural Advantage Skin Care c/o RJM Acquisitions, LLC 575 Underhill Blvd, Suite 224 Syosset, NY 11791		w					73.30
Account No.	╁	\vdash	collection		+	+	
Ohio Gastroenterology Group c/o lc Systems Inc P.o. Box 64378 St Paul, MN 55164		н					260.00
Sheet no1 of _3 sheets attached to Schedule of				Sub	tota	ı al	
Creditors Holding Unsecured Nonpriority Claims			(Total of				3,235.49

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B6F (Official Form 6F) (12/07) - Cont.

In re	Robert E Deis,	Case No. 2:14-bk-54400
	Joyce E Deis	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

	16	1	about Wife Islant as Occasionity	T_	1	T 5	Τ
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu: H W J C	band, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	N G E N	QU I D A	D I S P U T E D	AMOUNT OF CLAIM
Account No.			collections	Т	E		
Ohio Orthopedic c/o Pcb 5500 New Albany Rd Ste 2 Westerville, OH 43082		н			D		290.00
Account No.	T		Taxes	t			
Ohio State Department of Taxation 101 E. Town Street, 3rd Floor Columbus, OH 43215		J					
							33,790.58
Account No.			collection				
Riverside Methodist Hospital c/o Meade & Associates 737 Enterprise Dr Westerville, OH 43081		w					528.00
Account No.	┢		collection	+			
Riverside Radiology Associat c/o Pcb 5500 New Albany Rd Ste 2 Westerville, OH 43082		w					128.00
Account No. 11 CV 015162			Collection Complaint	+	\vdash	\vdash	
Robert Pritchett 978 Euclaire Ave Columbus, OH 43209		J	·				Unknown
Shooting 2 of 2 short weeks like Sell 11 S				C ₁₋₁	<u> </u>		O I I I I I I I I I I I I I I I I I I I
Sheet no. _2 of _3 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	Sub this			34,736.58

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B6F (Official Form 6F) (12/07) - Cont.

In re	Robert E Deis,		Case No	2:14-bk-54400	
	Joyce E Deis				
		 ,			

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

	1.			Τ_	T	-	1
CREDITOR'S NAME,	0	Hu	sband, Wife, Joint, or Community	- 6	N	l l	
MAILING ADDRESS	D	Н	DATE CLAIM WAS INCURRED AND	N	ŀ	S	
INCLUDING ZIP CODE, AND ACCOUNT NUMBER	B	W J	CONSIDERATION FOR CLAIM. IF CLAIM	İ	Q	Ų	AMOUNT OF CLAIM
(See instructions above.)	CODEBTOR	C	IS SUBJECT TO SETOFF, SO STATE.	Ğ	DZLLQUL	Ė	AMOUNT OF CLAIM
	R			CONTINGENT	A	טן	
Account No.			credit card purchases	T	DATED		
				L	D		
Target							
Po Box 673		w					
Minneapolis, MN 55440							
							32.00
				丄	L		02.00
Account No.							
	1						
				\bot	╙		
Account No.							
	1	-		+	⊢	_	
Account No.							
Account No.	╂	\vdash		+	╁	┢	
Account No.	l						
	1	1					
Sheet no. 3 of 3 sheets attached to Schedule of	_	-	'	Sub	tots	1	
Creditors Holding Unsecured Nonpriority Claims			(Total of t				32.00
Creditors fiolding Unsecured Monphority Claims			(10tal of t	1118	pag	ge)	
				7	Γota	ıl	
			(Report on Summary of So	chec	lule	es)	169,461.67

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B6G (Official Form 6G) (12/07)

In re	Robert E Deis,	Case No	2:14-bk-54400
	Joyce E Deis		

Debtors

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 2:14-bk-54400 Doc 16 Filed 07/01/14 Entered 07/01/14 13:57:12 Desc Main Document Page 16 of 40

B6H (Official Form 6H) (12/07)

In re	Robert E Deis,	Case N	To. 2:14-bk-54400
	Joyce E Deis		
-		,	

Debtors

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

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Fill in this information t	o identify your case:	
Debtor 1	Robert E Deis	
Debtor 2 (Spouse, if filing)	Joyce E Deis	
United States Bankrup	tcy Court for the: SOUTHERN DISTRICT OF OHIO	
Case number 2:1	4-bk-54400	Check if this is: ☐ An amended filing ☐ A supplement showing post-petition chapter
Official Form	B 6I	13 income as of the following date: MM / DD/ YYYY

Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
If you have more than one job,	Employment status	■ Employed	■ Employed
attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
employers.		Self Employed Real Estate	
Include part-time, seasonal, or	Occupation	Sales	Sales
self-employed work. Occupation may include student	Employer's name	Buckeye Commercial Real Estate, LLC	Kittles Furniture
or homemaker, if it applies.	Employer's address	781 E. Main St. Columbus, OH 43205	5600 Britton Parkway Dublin, OH 43016

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

				For Debtor 1		Debtor 2 or filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$	0.00	\$	2,047.94
3.	Estimate and list monthly overtime pay.	3.	+\$	0.00	+\$	0.00
4.	Calculate gross Income. Add line 2 + line 3.	4.	\$	0.00	\$ _	2,047.94

Official Form B 6I Schedule I: Your Income page 1

Debt Debt		Robert E Deis Joyce E Deis	_	Case	number (if known)	2:14-b	k-54400	
	Cop	by line 4 here	4.	For	Debtor 1 0.00		ebtor 2 or ling spouse 2,047.94	
5.	List	all payroll deductions:						
э.	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify:	5a. 5b. 5c. 5d. 5e. 5f. 5g.	\$_ \$_ \$_ \$_ \$_	0.00 0.00 0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ \$	420.81 0.00 61.44 0.00 0.00 0.00 0.00 0.00	
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	482.25	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	1,565.69	
8.	8b. 8c. 8d. 8e. 8f. 8g. 8h.	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependen regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Social Security Pension or retirement income Other monthly income. Specify:	8c. 8d. 8e.	\$_ \$_ \$_ \$_ \$	2,500.00 0.00 0.00 0.00 0.00 1,500.00 0.00 0.00	\$ \$ \$ \$ + \$	0.00 0.00 0.00 0.00 0.00 0.00 0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	4,000.00	\$	875.00	
10.		culate monthly income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		4,000.00 + \$_	2,440	0.69 = \$6	,440.69
11.	Inclu othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, you er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not incify:	ır deper		•		hedule J. 11. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rester that amount on the Summary of Schedules and Statistical Summary of Certilies					12. \$ <u>6</u>	,440.69
13.	Do :	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	1?				monthly i	

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7711							
Fill	in this information to ide	ntify your case:					
Deb	tor 1 Rober	t E Deis		Check	if this is:		
				☐ An	amended filing		
		E Deis				post-petition chapter 13	
(Spo	ouse, if filing)			exp	penses as of the follo	owing date:	
Unit	ted States Bankruptcy Co	urt for the: SOUTHERN DISTRICT O	F OHIO	N	MM / DD / YYYY		
Case	e number 2:14-bk-5	4400		□ As	separate filing for D	ebtor 2 because Debtor 2	
(If k	nown)				intains a separate h		
Of	ficial Form B	6J					
Sc	hedule J: You	ir Expenses				12/	13
Be a	s complete and accurat	e as possible. If two married people are					
		is needed, attach another sheet to this f	form. On the top of any addit	tional pages,	write your name a	nd case number	
(II K	mown). Answer every q	uestion.					
Part		Household					
1.	Is this a joint case?						
	☐ No. Go to line 2.						
	■ Yes. Does Debtor 2	live in a separate household?					
	■ No						
	☐ Yes. Debtor	2 must file a separate Schedule J.					
2.	Do you have dependen	ats? ■ No					
	Do not list Debtor 1 and		Or Dependent's relati	anchin to	Dependent's	Does dependent	
	Debtor 2.	Yes. Fill out this information for each dependent	Debtor 1 or Debtor		age	live with you?	
	Do not state the depend	•				□ No	
	names.					☐ Yes	
						□ No	
						☐ Yes	
						□ No	
						☐ Yes	
						□ No	
						☐ Yes	
3.	Do your expenses inclue expenses of people oth						
	yourself and your dep						
Part		Ongoing Monthly Expenses of your bankruptcy filing date unless your	ni are using this form as a su	innlement in	Chanter 13 case t	to report	
		he bankruptcy is filed. If this is a suppl					
app	licable date.						
Incl	ude expenses paid for w	rith non-cash government assistance if	you know the value of				
		cluded it on Schedule 1: Your Income (Your exp	enses	
4	The wentel on home on	manshin armanaas fan vann nasidanaa I		_			
4.	and any rent for the gro	vnership expenses for your residence. In und or lot.	nciude first mortgage payment	4. \$		0.00	
	If not included in line						
		T.		4 *		• • •	
	4a. Real estate taxes	rumon'a or ronton's incomer		4a. \$		0.00	
		wner's, or renter's insurance ace, repair, and upkeep expenses		4b. \$ 4c. \$		0.00 120.00	
		sociation or condominium dues		4c. \$		0.00	
5.		payments for your residence, such as ho	me equity loans	5. \$		0.00	

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Debtor 1 Debtor 2	Robert E Deis Joyce E Deis	Case num	ber (if known)	2:14-bk-54400
6. Utili	ities:			
6a.	Electricity, heat, natural gas	6a.	\$	325.00
6b.	Water, sewer, garbage collection	6b.	\$	65.04
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	90.00
6d.	Other. Specify:	6d.	\$	0.00
7. Foo	d and housekeeping supplies	7.	\$	990.00
8. Chil	dcare and children's education costs	8.	\$	0.00
9. Clot	hing, laundry, and dry cleaning	9.	\$	280.21
10. Pers	sonal care products and services	10.	\$	75.00
	lical and dental expenses	11.	\$	197.44
	nsportation. Include gas, maintenance, bus or train fare.			
	not include car payments.	12.	\$	375.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14. Cha	ritable contributions and religious donations	14.	\$	0.00
	rance.		-	
	not include insurance deducted from your pay or included in lines 4 or 20.			
15a.	Life insurance	15a.	\$	0.00
15b.	Health insurance	15b.	\$	23.00
15c.	Vehicle insurance	15c.	\$	150.00
15d.	Other insurance. Specify:	15d.	\$	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.		-	
Spec	ify: Self Employment Tax	16.	\$	200.00
	allment or lease payments:	17-	¢	0.00
17a.	1 2	17a.	·	0.00
17b.	1 2	17b.	· · · —	0.00
17c.	· · ·	17c.		0.00
17d.	1 7	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not report as deducte	e d 18.	\$	0.00
	n your pay on line 5, Schedule I, Your Income (Official Form 6I).	10.	\$	
	er payments you make to support others who do not live with you.	10	—	0.00
Spec	er real property expenses not included in lines 4 or 5 of this form or on <i>Schedule I: Y</i>	19.		
0. Oth 20a.		our incom 20a.		0.00
20a. 20b.		20a. 20b.		0.00
20c.		20c.		•
	1 • • •			0.00
20d.	. 1 . 1 1	20d.		0.00
20e.		20e.		0.00
1. Oth	er: Specify: Pet Expense	21.	+\$	50.00
	r monthly expenses. Add lines 4 through 21.	22.	\$	2,940.69
	result is your monthly expenses.			_
	culate your monthly net income.			
23a.	10 /	23a.	·	6,440.69
23b.	Copy your monthly expenses from line 22 above.	23b.	-\$	2,940.69
23c.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	3,500.00
For e			increase or decreas	se because of a modification to the terms

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B6 Declaration (Official Form 6 - Declaration). (12/07)

United States Bankruptcy Court Southern District of Ohio

In re	Robert E Deis Joyce E Deis		Case No.	2:14-bk-54400	
		Debtor(s)	Chapter	13	

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

	I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of sheets, and that they are true and correct to the best of my knowledge, information, and belief.						
Date	June 18, 2014	Signature	/s/ Robert E Deis Robert E Deis Debtor				
Date	June 18, 2014	Signature	/s/ Joyce E Deis Joint Debtor				

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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B7 (Official Form 7) (04/13)

United States Bankruptcy Court Southern District of Ohio

In re	Robert E Deis Joyce E Deis		Case No.	2:14-bk-54400	
		Debtor(s)	Chapter	13	

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNI	SOURCE
\$11,215.19	YTD Employment
\$19,508.65	YTD Gross Business Income
\$23,566.00	2013 Employment
\$17,789.00	2013 Gross Business Income
\$3,000.00	2013 1099 Misc Income
\$21,259.67	2012 Employment
\$13,005,00	2012 Gross Business Income

COLIDOR

AMOUNT

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B7 (Official Form 7) (04/13)

2. Income other than from employment or operation of business

None П

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

\$14,250.00 YTD Social Security \$31,256.00 2013 Social Security

\$29.00 2013 Royalties

\$11,217.80 2012 Social Security (wife) \$19,342.80 2012 Social Security (husband)

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or

services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS DATES OF AMOUNT STILL AMOUNT PAID OF CREDITOR **PAYMENTS** OWING

None

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT DATES OF PAID OR AMOUNT STILL PAYMENTS/ VALUE OF NAME AND ADDRESS OF CREDITOR **TRANSFERS** TRANSFERS OWING

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND AMOUNT STILL DATE OF PAYMENT AMOUNT PAID RELATIONSHIP TO DEBTOR OWING

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT	NATURE OF	COURT OR AGENCY	STATUS OR
AND CASE NUMBER	PROCEEDING	AND LOCATION	DISPOSITION
Ohio State Department of Taxation vs. Robert	Collection	Franklin County Common Pleas	Tax Liens
Deis	Complaint	•	
11 JG 010863	•		
04 JG 007635			
03 JG 006149			
03 JG 006148			
03 JG 006147			
08 JG 007160			
04 EX 000113			
94 JG 007029			

Robert Prichett vs. Robert Deis **Franklin County Common Pleas** Settled collection 11 CV 015162 complaint

Huntington National Bank v. Robert & Joyce **Foreclosure Franklin County Court of Common** Sheriff Sale Deis **Pleas** June 20, 2014

10 CV 013755

95 JG 009556

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately None

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE DESCRIPTION AND VALUE OF

DATE OF SEIZURE BENEFIT PROPERTY WAS SEIZED **PROPERTY**

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF **PROPERTY**

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND LOCATION NAME AND ADDRESS DESCRIPTION AND VALUE OF DATE OF OF COURT OF CUSTODIAN **PROPERTY** ORDER CASE TITLE & NUMBER

__ . __ . _

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7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT,
NAME OF PAYER IF OTHER
THAN DEBTOR
6/2014

AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$20.00; Credit Counseling

CredAbility 100 Edgewood Ave Suite 1800 Atlanta, GA 30303

6/2014

\$1,170.00; Legal Fees

Jump Legal Group, LLC 2130 Arlington Ave. Columbus, OH 43221

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

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11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

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17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

None

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF SITE NAME AND ADDRESS

DATE OF

ENVIRONMENTAL

GOVERNMENTAL UNIT

NOTICE

LAW

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

DATE OF NOTICE

ENVIRONMENTAL

NAME AND ADDRESS OF

I.AW

SITE NAME AND ADDRESS

GOVERNMENTAL UNIT

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None

NAME

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six **years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

ADDRESS (ITIN)/ COMPLETE EIN

NATURE OF BUSINESS

BEGINNING AND ENDING DATES

Robert E. Deis xx-6463 132 North Woods Blvd. Suite A

Commercial Real Estate

2006-present

Columbus, OH 43235

Real Estate Brokerage

3/2014 - present

Buckeve Commercial 464866251 Real Estate, LLC

781 E. Main St. Columbus, OH 43205

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None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.



NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS DATES SERVICES RENDERED

None

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None

d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

21 . Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

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None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

ADDRESS

DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date June 18, 2014 Signature /s/ Robert E Deis

Robert E Deis

Debtor

Date June 18, 2014 Signature /s/ Joyce E Deis

Joyce E Deis
Joint Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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LBR Form 2016-1(b)

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF OHIO

In re:		Case No. 2:14-bk-54400
Robert E Deis Joyce E Deis		Chapter 13
	Debtor(s)	Judge

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR AND APPLICATION FOR ALLOWANCE OF FEES IN CHAPTER 13 CASE

I. **Disclosure**

	<u></u>		
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. R. Bankr. P. 2016(b), I certify that I at that compensation paid to me within one year before the filing of the petition services rendered or to be rendered on behalf of the debtor(s) in contemplation of follows:	n in bankruptcy	, or agreed to be paid to me, for
	For legal services, I have agreed to accept	\$	3,500.00
	Prior to the filing of this statement I have received	\$	1,170.00
	Balance Due	\$	2,330.00
 3. 	The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify):		
4.	■ I have not agreed to share the above-disclosed compensation with any other passociates of my law firm.	persons unless t	hey are members and/or
	☐ I have agreed to share the above-disclosed compensation with another person of my law firm. A copy of the agreement, together with a list of the names of attached.		

Application II.

- I hereby apply for an allowance of fees in the amount set forth above. I understand and agree that the Court may approve, without itemization, an allowance of fees not to exceed \$3,500, for rendering the legal services set forth below. If I seek payment of fees in excess of \$3,500, I will file a separate application that sets forth the total amount of the fee requested, and that includes an itemization of all legal services performed, the hourly rate at which the services were performed, and the actual time spent by the case attorney, any other attorney, paralegal or professional person for whom fees are sought. Any request for reimbursement of expenses shall include an itemization of the expenses.
 - a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether, and under what chapter, to file a petition in bankruptcy;
 - b. Preparation and filing of any petition, schedules, statement of affairs and amendments thereto that may be required;
 - Preparation and filing of chapter 13 plan, and any pre-confirmation amendments thereto that may be required; c.
 - Preparation and filing of payroll orders and amended payroll orders; d.
 - Representation of the debtor at the meeting of creditors and confirmation hearing; and any continued hearings thereof; e.
 - Filing of address changes; f.
 - Routine phone calls and questions; g.
 - Review of claims; h.
 - Review of notice of intention to pay claims; i.
 - Preparation and filing of objections to non-real estate and non-tax claims; j.

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- k. Preparation and filing of first motion to suspend or reduce payments;
- 1. Preparation and filing of debtor's certification regarding issuance of discharge order; and
- m. Any other duty as required by local decision or policy.
- 6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Representation in adversary proceedings, motions to avoid liens, motions to redeem, and amending schedules to include additional creditors.

(614) 481-4480

June 18, 2014	/s/ W. Mark Jump	
Date	W. Mark Jump	
	Signature of Attorney 0062837	
	Jump Legal Group, LLC	
	2130 Arlington Ave.	
	Columbus, OH 43221	

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B 22C (Official Form 22C) (Chapter 13) (04/13)

In re	Robert Joyce	E Deis E Deis	_
Case N	umber:	Debtor(s) 2:14-bk-54400	
		(If known)	

According to the calculations required by this statement:
☐ The applicable commitment period is 3 years.
■ The applicable commitment period is 5 years.
■ Disposable income is determined under § 1325(b)(3).
☐ Disposable income is not determined under § 1325(b)(3).
(Check the boxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

		Par	t I.	REPORT OF IN	COM	E				
1		Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed. a. □ Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10.								
		Married. Complete both Column A ("Debto					me'')	for Lines 2-10		
	All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before							Column A		Column B
	the fi	dar months prior to filing the bankruptcy case ling. If the amount of monthly income varied nonth total by six, and enter the result on the a	dur	ing the six months				Debtor's Income		Spouse's Income
2	Gros	s wages, salary, tips, bonuses, overtime, con	nmis	ssions.			\$	0.00	\$	2,110.48
3	enter profe numb	the difference in the appropriate column(s) of ssion or farm, enter aggregate numbers and proper less than zero. Do not include any part of luction in Part IV.	Lin	e 3. If you operate le details on an atta business expense	more chme	e than one business, ent. Do not enter a ered on Line b as				
	a.	Gross receipts	\$	Debtor 3,251.44	\$	Spouse 0.00				
	b.	Ordinary and necessary business expenses	\$	566.94		0.00				
	c.	Business income	Sul	otract Line b from			\$	2,684.51	\$	0.00
4		ppropriate column(s) of Line 4. Do not enter a of the operating expenses entered on Line b	as a	a deduction in Par Debtor	t IV.					
	a.	Gross receipts	\$	0.00		0.00				
	b.	Ordinary and necessary operating expenses	\$	0.00 lbtract Line b from		0.00	¢.	0.00	¢.	0.00
	c.	Rent and other real property income	St	ibtract Line b from	Line	a	\$	0.00	\$	0.00
5	Inter	est, dividends, and royalties.					\$	0.00	\$	0.00
6	Pensi	ion and retirement income.					\$	0.00	\$	0.00
		Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse. Each regular payment should be reported in only one column; if a payment is listed in Column A, do not report that payment in Column B.								
7	purp debto	or's spouse. Each regular payment should be re	port	ed in only one col			\$	0.00	\$	0.00
7	purp debto listed Unen Howe benef	or's spouse. Each regular payment should be re	eport Colu n the ensa e an	ted in only one column B. e appropriate column received by you	nn(s)	of Line 8. your spouse was a	\$	0.00	\$	0.00

on a se mainte separa paymen	e from all other sources. Specify source parate page. Total and enter on Line 9. enance payments paid by your spouse, the maintenance. Do not include any bout species as a victim of a war crime, outlined or domestic terrorism.	Do not include alimo but include all other enefits received under	ny or separate payments of alimony he Social Security Ad	or			
		Debtor	Spouse				
b.		\$ \$	\$ \$		\$ 0.0	00 \$	0.00
	tal. Add Lines 2 thru 9 in Column A, and tumn B. Enter the total(s).	d, if Column B is comp	leted, add Lines 2 thi	ough 9	\$ 2,684.		2,110.48
	If Column B has been completed, add Lal. If Column B has not been completed				\$		4,794.99
	Part II. CALCULAT	ION OF § 1325(b)	(4) COMMITM	ENT P	PERIOD		
Enter	the amount from Line 11					\$	4,794.99
calcula enter of the hou income debtor' on a se	al Adjustment. If you are married, but a attion of the commitment period under § on Line 13 the amount of the income listed usehold expenses of you or your dependence (such as payment of the spouse's tax liands dependents) and the amount of income apparate page. If the conditions for enterior	1325(b)(4) does not reed in Line 10, Column ents and specify, in the ability or the spouse's see devoted to each purping this adjustment do 1	quire inclusion of the B that was NOT paid lines below, the basis upport of persons othose. If necessary, list	income on a reg s for exc er than t	of your spouse, gular basis for luding this he debtor or the		
C.	and enter on Line 13	\$				ф	0.00
	act Line 13 from Line 12 and enter the	rocult				\$	0.00
						\$	4,794.99
	dized current monthly income for § 13 the result.	325(b)(4). Multiply the	amount from Line 14	4 by the	number 12 and	\$	57,539.88
	table median family income. Enter the ration is available by family size at www.						
a. Ent	er debtor's state of residence:	OH b. Enter	debtor's household siz	ze:	2	\$	53,852.00
□ The top	e amount on Line 15 is less than the and of page 1 of this statement and continue amount on Line 15 is not less than the top of page 1 of this statement and continue the top of t	nount on Line 16. Che with this statement. e amount on Line 16.	cck the box for "The a				
	Part III. APPLICATION OF	§ 1325(b)(3) FOR DI	TERMINING DISE	POSABI	LE INCOME		
Enter	the amount from Line 11.					\$	4,794.99
any inc debtor paymen depend	al Adjustment. If you are married, but a come listed in Line 10, Column B that w or the debtor's dependents. Specify in that of the spouse's tax liability or the spoulents) and the amount of income devoted the page. If the conditions for entering this	ras NOT paid on a regular lines below the basis use's support of person to each purpose. If no	lar basis for the house for excluding the Cos other than the debto cessary, list additiona	ehold ex lumn B r or the	penses of the income(such as debtor's		
	and enter on Line 19.	IΨ				\$	0.00
Curre	nt monthly income for § 1325(b)(3). Su	ubtract Line 19 from L	ne 18 and enter the re	esult.		\$	4,794.99
	,					Ψ	+, <i>1</i> 34.33

	Annualized current monthly income for § 1325(b)(3). Multiply the amount from Line 20 by the number 12 and enter the result.					\$	57,539.88	
22	Applio	Applicable median family income. Enter the amount from Line 16.					\$	53,852.00
	Applic	cation of § 1325(b)(3). Che	ck the applicable box ar	nd pro	ceed as directed.		1	
23	■ The	nined u	ınder §					
			rmined under § V, or VI.					
		Part IV. C	ALCULATION (OF I	DEDUCTIONS FR	OM INCOME		
		Subpart A: Do	eductions under Star	ndar	ds of the Internal Reve	nue Service (IRS)		
24A	National Standards: food, apparel and services, housekeeping supplies, personal care, and miscellaneous. Enter in Line 24A the "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable number of persons. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.					Expenses for the om the clerk of the e allowed as exemptions	\$	1,092.00
24B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B.							
	02.110	a zines er ana ez to sotam	a total nearth care amov	uiit, ai	id effect the result in Line i	24B.		
		ons under 65 years of age	a total ficulti care amov	1	ons 65 years of age or old			
			60	Pers				
	Perso	ons under 65 years of age		Pers	ons 65 years of age or old	ler		
	Perso	Allowance per person	60	Pers a2. b2.	Allowance per person	144	\$	120.00
25A	Perso a1. b1. c1. Local Utilitie availab the nur any ad	Allowance per person Number of persons Subtotal Standards: housing and uses Standards; non-mortgage ole at www.usdoj.gov/ust/omber that would currently be ditional dependents whom years.	120.00 tilities; non-mortgage expenses for the applic r from the clerk of the be allowed as exemption you support.	Pers a2. b2. c2. expen able coankruss on y	Allowance per person Number of persons Subtotal ses. Enter the amount of the ounty and family size. (The ptcy court). The applicable our federal income tax retrieval.	ne IRS Housing and his information is e family size consists of turn, plus the number of	\$	120.00 504.00
25A 25B	Personal. b1. c1. Local Utilities available the nurany add Local Housing available the nurany add debts s	Allowance per person Number of persons Subtotal Standards: housing and uses Standards; non-mortgage ole at www.usdoj.gov/ust/ omber that would currently be ditional dependents whom a standards: housing and use and Utilities Standards; no be at www.usdoj.gov/ust/ omber that would currently be ditional dependents whom a secured by your home, as stater an amount less than zerons	tilities; non-mortgage of expenses for the applical refrom the clerk of the been allowed as exemption as expenses for the support. tilities; mortgage/rent expense for from the clerk of the been allowed as exemption as exemption as exemption (you support); enter on Leated in Line 47; subtraction.	Pers a2. b2. c2. expen able coankrus on y exper or you askrus on y tine b t Line	Allowance per person Number of persons Subtotal ses. Enter the amount of the ounty and family size. (The ptcy court). The applicable our federal income tax returns and family size (the total of the Average Market before the total of the Average Market	ne IRS Housing and his information is e family size consists of turn, plus the number of the IRS this information is family size consists of turn, plus the number of the IRS this information is family size consists of turn, plus the number of turn, plus the number of tonthly Payments for any the result in Line 25B. Do		
	Perso a1. b1. c1. Local Utilities availabe the nurrany ad Local Housing availabe the nurrany ad debts sonot en a.	Allowance per person Number of persons Subtotal Standards: housing and uses Standards; non-mortgage of the at www.usdoj.gov/ust/omber that would currently be ditional dependents whom a standards: housing and use and Utilities Standards; no eat www.usdoj.gov/ust/omber that would currently be ditional dependents whom a standards are the at www.usdoj.gov/ust/omber that would currently be ditional dependents whom a secured by your home, as stater an amount less than zero.	tilities; non-mortgage of expenses for the applical refrom the clerk of the beginned as exemption and the expense for the subject of the beginned as exemption and the clerk of the beginned as the clerk of the beginning as the clerk of the beginned as the clerk of the beginned as	Pers a2. b2. c2. expen able coankrus s on y exper or you oak ru y is on y in b t Line	Allowance per person Number of persons Subtotal ses. Enter the amount of the ounty and family size. (The ptcy court). The applicable our federal income tax returns and family size (the total of the Average Materials) before Line a and enter the total of the Average Materials and enter the	ne IRS Housing and his information is e family size consists of turn, plus the number of the IRS this information is family size consists of turn, plus the number of turn, plus the number of tonthly Payments for any		
	Perso a1. b1. c1. Local Utilities availabe the nurral availabe th	Allowance per person Number of persons Subtotal Standards: housing and uses Standards; non-mortgage of the at www.usdoj.gov/ust/omber that would currently be ditional dependents whom a standards: housing and use and Utilities Standards; non-mortgage of the at www.usdoj.gov/ust/omber that would currently be ditional dependents whom a secured by your home, as stater an amount less than zee IRS Housing and Utilities and Average Monthly Payment home, if any, as stated in L	tilities; non-mortgage of expenses for the applical representation of the best allowed as exemption Standards; mortgage/regroup for any debts secured best executed best exemption and exemption.	Pers a2. b2. c2. expen able coankrus s on y exper or you oak ru y is on y in b t Line	Allowance per person Number of persons Subtotal ses. Enter the amount of the ounty and family size. (The ptcy court). The applicable our federal income tax retrieves. Enter, in Line a belower county and family size (the ptcy court) (the applicable our federal income tax retrieves the total of the Average M beform Line a and enter the the sense \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	ne IRS Housing and his information is a family size consists of turn, plus the number of the IRS this information is a family size consists of turn, plus the number of the IRS this information is a family size consists of turn, plus the number of tonthly Payments for any the result in Line 25B. Do 1,161.00	\$	504.00
	Personal. b1. c1. Local Utilities availabe the nurany addebts sonot en a. b. c.	Allowance per person Number of persons Subtotal Standards: housing and uses Standards; non-mortgage ple at www.usdoj.gov/ust/omber that would currently be ditional dependents whom a standards: housing and using and Utilities Standards; role at www.usdoj.gov/ust/omber that would currently be ditional dependents whom a secured by your home, as stater an amount less than zee IRS Housing and Utilities Average Monthly Payment home, if any, as stated in L. Net mortgage/rental expense.	tilities; non-mortgage of expenses for the applicate of the clerk of the best allowed as exemption and you support. tilities; mortgage/rent expense for from the clerk of the best allowed as exemption you support); enter on Leated in Line 47; subtraction. Standards; mortgage/rent for any debts secured best and the secured	Pers a2. b2. c2. expen able c cankru os on y exper or you cankru os on y tine b t Line	Allowance per person Number of persons Subtotal ses. Enter the amount of the ounty and family size. (The ptcy court). The applicable our federal income tax returns and family size (uptcy court) (the applicable our federal income tax returns total of the Average M before Line a and enter the lense \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	ne IRS Housing and his information is e family size consists of turn, plus the number of the IRS this information is family size consists of turn, plus the number of tonthly Payments for any he result in Line 25B. Do 1,161.00 1,788.94 The state of the IRS this information is the family size consists of turn, plus the number of the family size consists of turn, plus the number of the family size consists of turn, plus the number of the family size consists of turn, plus the number of the family size consists of turn, plus the number of the family size consists of turn, plus the number of the family size consists of turn, plus the number of the family size consists of turn, plus the number of the family size consists of turn, plus the number of the IRS this information is the family size consists of turn, plus the number of the IRS this information is the family size consists of turn, plus the number of the IRS this information is the family size consists of turn, plus the number of the IRS this information is the family size consists of turn, plus the number of the IRS this information is the family size consists of turn, plus the number of the IRS this information is the family size consists of turn, plus the number of the IRS this information is the family size consists of turn, plus the number of the IRS this information is the family size consists of turn, plus the number of the IRS this information is the family size consists of turn, plus the number of the IRS this information is the family size consists of turn, plus the number of the IRS this information is the family size consists of turn, plus the number of the IRS this information is the family size consists of turn, plus the number of the IRS this information is the family size consists of turn, plus the number of the IRS this information is the family size consists of turn, plus the number of the IRS this information is the family size consists of turn, plus the number of the IRS this information is the number of the IRS this information is the n		504.00
	Personal. bl. cl. Local Utilities available the nurany addebts sonot en a. b. c. Local 25B de Standa	Allowance per person Number of persons Subtotal Standards: housing and uses Standards; non-mortgage of the at www.usdoj.gov/ust/omber that would currently be ditional dependents whom a standards: housing and use and Utilities Standards; non-mortgage of the at www.usdoj.gov/ust/omber that would currently be ditional dependents whom a secured by your home, as stater an amount less than zee IRS Housing and Utilities and Average Monthly Payment home, if any, as stated in L	tilities; non-mortgage of expenses for the applicate allowed as exemption you support. tilities; mortgage/rent expense for from the clerk of the best allowed as exemption you support. Standards; mortgage/rent expense for any debts secured best and a secured best a secured best and a secured best	Pers a2. b2. c2. expen able c cankru os on y exper for you cankru os on y you u you you u you u	Allowance per person Number of persons Subtotal ses. Enter the amount of the ounty and family size. (The ptcy court). The applicable our federal income tax returns and family size (the ptcy court) (the applicable our federal income tax returns total of the Average M before Line a and enter the total of the Average M before Line a and enter the sense \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	ne IRS Housing and his information is e family size consists of turn, plus the number of the IRS this information is family size consists of turn, plus the number of tonthly Payments for any he result in Line 25B. Do 1,161.00 1,788.94 Tom Line a. Out in Lines 25A and Housing and Utilities	\$	

İ	Local Standards: transportation; vehicle operation/public transportation expense allowance in this category regardless of whether you pay the regardless of whether you use public transportation.			
27A	Check the number of vehicles for which you pay the operating expens			
	included as a contribution to your household expenses in Line 7. \square (
	If you checked 0, enter on Line 27A the "Public Transportation" amo Transportation. If you checked 1 or 2 or more, enter on Line 27A the Standards: Transportation for the applicable number of vehicles in the Census Region. (These amounts are available at www.usdoj.gov/ust/	\$	424.00	
27B	Local Standards: transportation; additional public transportation for a vehicle and also use public transportation, and you contend that your public transportation expenses, enter on Line 27B the "Public T. Standards: Transportation. (This amount is available at www.usdoj.gr.court.)	r \$	0.00	
	Local Standards: transportation ownership/lease expense; Vehicle you claim an ownership/lease expense. (You may not claim an owner vehicles.) $\Box 1 \Box 2$ or more.			
28	Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 1, as stated in Lithe result in Line 28. Do not enter an amount less than zero.	court); enter in Line b the total of the Averag	e	
	a. IRS Transportation Standards, Ownership Costs	\$ 0.00]	
	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47	\$ 0.00		
	c. Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	\$	0.00
29	Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 2, as stated in Lithe result in Line 29. Do not enter an amount less than zero.	e		
		•		
	a. IRS Transportation Standards, Ownership Costs	\$ 0.00		
	Average Monthly Payment for any debts secured by Vehicle		1	
	Average Monthly Payment for any debts secured by Vehicle	\$ 0.00	1	0.00
30	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47	\$ 0.00 \$ 0.00 Subtract Line b from Line a. expense that you actually incur for all federal, acome taxes, self employment taxes, social		0.00 632.30
30	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47 c. Net ownership/lease expense for Vehicle 2 Other Necessary Expenses: taxes. Enter the total average monthly e state, and local taxes, other than real estate and sales taxes, such as in	\$ 0.00 \$ 0.00 \$ Subtract Line b from Line a. expense that you actually incur for all federal, acome taxes, self employment taxes, social es taxes. nt. Enter the total average monthly retirement contributions, union dues, and	\$	
	Average Monthly Payment for any debts secured by Vehicle b. 2, as stated in Line 47 c. Net ownership/lease expense for Vehicle 2 Other Necessary Expenses: taxes. Enter the total average monthly e state, and local taxes, other than real estate and sales taxes, such as in security taxes, and Medicare taxes. Do not include real estate or sale Other Necessary Expenses: involuntary deductions for employmed deductions that are required for your employment, such as mandatory	\$ 0.00 \$ 0.00 \$ Usubtract Line b from Line a. Expense that you actually incur for all federal, accome taxes, self employment taxes, social est axes. Int. Enter the total average monthly or retirement contributions, union dues, and untary 401(k) contributions. Inthly premiums that you actually pay for term	\$	632.30
31	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47 c. Net ownership/lease expense for Vehicle 2 Other Necessary Expenses: taxes. Enter the total average monthly e state, and local taxes, other than real estate and sales taxes, such as in security taxes, and Medicare taxes. Do not include real estate or sale Other Necessary Expenses: involuntary deductions for employme deductions that are required for your employment, such as mandatory uniform costs. Do not include discretionary amounts, such as volu Other Necessary Expenses: life insurance. Enter total average mon life insurance for yourself. Do not include premiums for insurance	\$ 0.00 \$ Usubtract Line b from Line a. Expense that you actually incur for all federal, acome taxes, self employment taxes, social estaxes. Int. Enter the total average monthly retirement contributions, union dues, and untary 401(k) contributions. Inthly premiums that you actually pay for term on your dependents, for whole life or for tall monthly amount that you are required to	\$ \$	632.30
31	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47 c. Net ownership/lease expense for Vehicle 2 Other Necessary Expenses: taxes. Enter the total average monthly e state, and local taxes, other than real estate and sales taxes, such as in security taxes, and Medicare taxes. Do not include real estate or sale Other Necessary Expenses: involuntary deductions for employme deductions that are required for your employment, such as mandatory uniform costs. Do not include discretionary amounts, such as volu Other Necessary Expenses: life insurance. Enter total average mon life insurance for yourself. Do not include premiums for insurance any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the tot pay pursuant to the order of a court or administrative agency, such as	\$ 0.00 \$ 0.00 \$ Usubtract Line b from Line a. Expense that you actually incur for all federal, acome taxes, self employment taxes, social estaxes. Int. Enter the total average monthly retirement contributions, union dues, and untary 401(k) contributions. Inthly premiums that you actually pay for term on your dependents, for whole life or for tall monthly amount that you are required to spousal or child support payments. Do not Tysically or mentally challenged child. Entertion that is a condition of employment and for	\$ \$ \$	0.00 0.00

Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expenses health care that is required for the health and welfare of yourself or your dependents, that is not reimburs insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Linclude payments for health insurance or health savings accounts listed in Line 39.	by
metade payments for feature metades of feature savings decounts asset in 2 me ex-	\$ 77.44
Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that actually pay for telecommunication services other than your basic home telephone and cell phone service pagers, call waiting, caller id, special long distance, or internet service-to the extent necessary for your he welfare or that of your dependents. Do not include any amount previously deducted.	such as
Total Expenses Allowed under IRS Standards. Enter the total of Lines 24 through 37.	\$ 2,849.74
Subpart B: Additional Living Expense Deductions	•
Note: Do not include any expenses that you have listed in Lines 24	7
Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expense the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.	ses in
a. Health Insurance \$ 0.00	
b. Disability Insurance \$ 0.00	
c. Health Savings Account \$ 0.00	
Total and enter on Line 39	\$ 0.00
If you do not actually expend this total amount, state your actual total average monthly expenditures in below:	e space
\$	
Continued contributions to the care of household or family members. Enter the total average actual nexpenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chill, or disabled member of your household or member of your immediate family who is unable to pay for expenses. Do not include payments listed in Line 34.	nically
Protection against family violence. Enter the total average reasonably necessary monthly expenses that actually incur to maintain the safety of your family under the Family Violence Prevention and Services A applicable federal law. The nature of these expenses is required to be kept confidential by the court.	
Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Standards for Housing and Utilities that you actually expend for home energy costs. You must provide trustee with documentation of your actual expenses, and you must demonstrate that the additional a claimed is reasonable and necessary.	ır case
Education expenses for dependent children under 18. Enter the total average monthly expenses that y actually incur, not to exceed \$156.25 per child, for attendance at a private or public elementary or second school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable necessary and not already accounted for in the IRS Standards.	
Additional food and clothing expense. Enter the total average monthly amount by which your food and expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS Nation Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.or/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed reasonable and necessary.	othing v/ust/
Charitable contributions. Enter the amount reasonably necessary for you to expend each month on char	
contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U. 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income.	\$ 0.00

		Subpa	rt C: Deductions for D	ebt l	Payment			
47	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 47.							
	Name of Creditor	Propert	y Securing the Debt		Average Monthly	Does payment include taxes		
	a. Household Realty	Colum Month	ghland Drive bus, Ohio 43214 ly Payment: \$1123.00; s: \$61,089.54	\$	1.123.00	or insurance ■yes □no		
		718 Hi Colum Month	ghland Drive ibus, Ohio 43214 ly Payment: \$728.00; s: \$27,896.43; Insurance:		1,120.00	700 ==00		
	b. Huntington Mortg	age Co State		\$	665.94	■yes □no		
				T	otal: Add Lines		\$	1,788.94
48	your deduction 1/60th of ar payments listed in Line 47, sums in default that must be	y amount (the "ci in order to maint e paid in order to	r your support or the support of ure amount") that you must pa ain possession of the property, avoid repossession or foreclose all entries on a separate page.	y the The	creditor in addit	ion to the uld include any		
	Name of Creditor		erty Securing the Debt		1/60th of t	the Cure Amount		
	a. Household Realty	Colu	Highland Drive Imbus, Ohio 43214 thly Payment: \$1123.00; ears: \$61,089.54		\$	1,018.16		
		7.110	<u></u>			Total: Add Lines	\$	1,018.16
49		nd alimony claim	Enter the total amount, divided so, for which you were liable at use set out in Line 33.				\$	366.86
	Chapter 13 administrative resulting administrative exp		ply the amount in Line a by th	e amo	ount in Line b, a	nd enter the		
50	a. Projected average r			\$		3,500.00		
30	issued by the Execu	utive Office for U lable at www.usd	s determined under schedules nited States Trustees. (This oj.gov/ust/ or from the clerk of	f x		4.60		
			ense of chapter 13 case	То	otal: Multiply Li	nes a and b	\$	161.00
51	Total Deductions for Debt	Payment. Enter	the total of Lines 47 through	50.			\$	3,334.96
		Subpa	rt D: Total Deductions	fron	n Income			
52	Total of all deductions fro	m income. Enter	the total of Lines 38, 46, and	51.			\$	6,184.70
	Part V. DE	TERMINATI	ON OF DISPOSABLE	INC	COME UNDI	ER § 1325(b)(2	2)	
53	Total current monthly inc	ome. Enter the a	mount from Line 20.				\$	4,794.99
54	Support income. Enter the monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I, that you received in accordance with applicable nonbankruptcy law, to the extent reasonably necessary to be expended for such child.				\$	0.00		
55	Qualified retirement deductions. Enter the monthly total of (a) all amounts withheld by your employer from wages as contributions for qualified retirement plans, as specified in § 541(b)(7) and (b) all required repayments of loans from retirement plans, as specified in § 362(b)(19).						f \$	0.00

56	Total of all deductions allowed under § 707(b)(2). Ente	the amount from Line 52.	6,184.		
	Deduction for special circumstances. If there are special circumstances that justify additional expenses for which there is no reasonable alternative, describe the special circumstances and the resulting expenses in lines a-c below. If necessary, list additional entries on a separate page. Total the expenses and enter the total in Line 57. You must provide your case trustee with documentation of these expenses and you must provide a detailed explanation of the special circumstances that make such expense necessary and reasonable.				
57	Nature of special circumstances Amount of Expense				
	a.	\$			
	b.	\$			
	c.	\$			
		Total: Add Lines	0.		
58	Total adjustments to determine disposable income. Adresult.		\$ 6,184.		
50			-1,389.		
59	Monthly Disposable Income Under § 1325(b)(2). Subtr	ct Line 58 from Line 53 and enter the result.	5 -1,309.		
39	Part VI. ADDITION Other Expenses. List and describe any monthly expenses of you and your family and that you contend should be an 707(b)(2)(A)(ii)(I). If necessary, list additional sources on	DNAL EXPENSE CLAIMS not otherwise stated in this form, that are required for the hadditional deduction from your current monthly income und a separate page. All figures should reflect your average more	nealth and welfare		
60	Part VI. ADDITION Other Expenses. List and describe any monthly expenses of you and your family and that you contend should be an 707(b)(2)(A)(ii)(I). If necessary, list additional sources or each item. Total the expenses. Expense Description a. b. c.	DNAL EXPENSE CLAIMS not otherwise stated in this form, that are required for the hadditional deduction from your current monthly income und a separate page. All figures should reflect your average model of the separate page. Monthly Amount \$ \$ \$ \$ \$ \$	nealth and welfare		
	Part VI. ADDITION Other Expenses. List and describe any monthly expenses of you and your family and that you contend should be an 707(b)(2)(A)(ii)(I). If necessary, list additional sources or each item. Total the expenses. Expense Description a. b. c. d.	DNAL EXPENSE CLAIMS not otherwise stated in this form, that are required for the hadditional deduction from your current monthly income und a separate page. All figures should reflect your average model of the hadditional deduction from your current monthly income und a separate page. All figures should reflect your average model of the hadditional deduction from your current monthly income under the hadditional deduction from your current monthly income under the hadditional deduction from your current monthly income under the hadditional deduction from your current monthly income under the hadditional deduction from your current monthly income under the hadditional deduction from your current monthly income under the hadditional deduction from your current monthly income under the hadditional deduction from your current monthly income under the hadditional deduction from your current monthly income under the hadditional deduction from your current monthly income under the hadditional deduction from your current monthly income under the hadditional deduction from your current monthly income under the hadditional deduction from your current monthly income under the hadditional deduction from your current monthly income under the hadditional deduction from your current monthly income under the hadditional deduction from your current monthly income under the hadditional deduction from your current monthly income under the hadditional deduction from your current monthly income under the hadditional deduction from your current monthly income under the hadditional deduction from your current monthly income under the hadditional deduction from your current monthly income under the hadditional deduction from your current monthly income under the hadditional deduction from your current monthly income under the hadditional deduction from your current monthly income under the hadditional deduction from your current monthly income under the haddition from your current monthly income under the haddition from your current	nealth and welfare		
	Part VI. ADDITION Other Expenses. List and describe any monthly expenses of you and your family and that you contend should be an 707(b)(2)(A)(ii)(I). If necessary, list additional sources or each item. Total the expenses. Expense Description a. b. c. d. Total: Add	DNAL EXPENSE CLAIMS not otherwise stated in this form, that are required for the hadditional deduction from your current monthly income und a separate page. All figures should reflect your average model of the separate page. Monthly Amount \$ \$ \$ \$ \$ \$ \$ \$ \$	nealth and welfare		

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 12/01/2013 to 05/31/2014.

Line 3 - Income from operation of a business, profession, or farm

Source of Income: **Business Income** Income/Expense/Net by Month:

	Date	Income	Expense	Net
6 Months Ago:	12/2013	\$0.00	\$0.00	\$0.00
5 Months Ago:	01/2014	\$0.00	\$0.00	\$0.00
4 Months Ago:	02/2014	\$0.00	\$0.00	\$0.00
3 Months Ago:	03/2014	\$7,638.62	\$1,799.90	\$5,838.72
2 Months Ago:	04/2014	\$5,365.90	\$585.18	\$4,780.72
Last Month:	05/2014	\$6,504.13	\$1,016.54	\$5,487.59
_	Average per month:	\$3,251.44	\$566.94	
			Average Monthly NET Income:	\$2,684.51

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B 22C (Official Form 22C) (Chapter 13) (04/13)

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Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 12/01/2013 to 05/31/2014.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Kittles** Year-to-Date Income:

Last Year:

Starting Year-to-Date Income: \$21,518.17 from check dated 11/30/2013 Ending Year-to-Date Income: \$23,566.11 from check dated 12/31/2013 .

This Year:

Current Year-to-Date Income: \$10,614.91 from check dated 5/31/2014

Income for six-month period (Current+(Ending-Starting)): $\underline{$12,662.85}$. Average Monthly Income: \$2,110.48.